

OAHU CANDIDATES-
SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND CANDIDATES-
SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT
CANDIDATE COMMITTEE

COPY

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.")

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

Carolyn Martinez Golovich

(b) Committee Name: Friends of Carolyn Golovich

(c) Mailing Address: 929 54 MAKAKU Dr #71

Kapolei, HI 96707-1340

(d) Phone (Bus) 877-9087 (Res) 672-9050

Treasurer's

SECTION II-TYPE OF REPORT

(See the Schedule of Reporting Dates to complete this section)

- ☐ 1st Preliminary Primary ☐ Amended ☐ First ☐ Third
☐ 2nd Preliminary Primary ☐ Second ☐ Fourth
☐ Final Primary
☐ Preliminary General
☒ Final Election Period
☐ Supplemental

REPORTING PERIOD

10-19-04 through 11-02-04

SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS
(Complete Section IV on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD ² TOTAL TO DATE
1. Cash on Hand at the Beginning of the Election Period ²		0
2. Cash on Hand at the Beginning of this Reporting Period.....	\$1938.35	
3. Total Receipts (From Line 15).....	4448.35	*12,683.67
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	6386.70	12,683.67
5. Total Disbursements (not including Unpaid Expenditures) (From Line 19).....	5269.76	11,566.73
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4)....	\$1,116.94	\$1,116.94
7. Total Loans at the Closing of this Reporting Period.....	521.35	
8. Total Unpaid Expenditures at the Closing of this Reporting Period.....	623.95	
9. Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8).....	\$1,145.30	
10. Surplus/Deficit (Subtract Line 9 from Line 6).....	<28.36>	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Carolyn Golovich

Candidate Signature

12-22-04

Date

[Signature]

Treasurer Signature

12-02-04

Date

¹ Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less. Short form reporting requires completion of only Section I, Section II, and Section III of this Disclosure Report.

² An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS
(If Necessary, Complete Schedules A through E Before Completing This Section)

RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE	
11. Contributions From:			11
(a) Individuals/Other Entities/Noncandidate Committees/Political Parties			11(a)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	917.08	5058.09	11(a)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	2875.00	5405.00	11(a)(ii)
(iii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii)).....	3787.08	10,463.09	11(a)(iii)
(b) Candidate or Candidate's Immediate Family			11(b)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	161.27	317.54	11(b)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	0	1065.62	11(b)(ii)
(iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii)).....	161.27	1383.16	11(b)(iii)
12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)).....	3948.35	11846.25	12
13. Public Funds and Other Receipts.....	0	0	13
14. Loans.....	500.00	837.42	14
15. Total Receipts (Add Lines 12 through 14).....	\$4448.35	\$12683.67	15
DISBURSEMENTS			
16. Expenditures.....	\$4953.69	11,250.66	16
17. Loans Repaid or Forgiven.....	316.07	316.07	17
18. Unpaid Expenditures Paid or Forgiven.....	0	0	18
19. Subtotal Disbursements (Add Lines 16 through 18).....	\$5269.76	\$11,566.73	19
20. Unpaid Expenditures.....	623.95		20
21. Total Disbursements (Add Lines 19 and 20).....	\$5893.71	11,566.73	21

CHECK ONLY ONE BOX
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

☒ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE
COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: Carolyn Martinez Golojuch PAGE 1 OF 1

FRIENDS OF CAROLYN Golojuch

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
10/22/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Roland Halperin 3126 Oahu Ave Honolulu 96822		\$125.00	\$250.00
10/26/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION CASTLE + COOKE P.O. Box 898900 Mililani, HI 96789-8900		\$250.00	
10/26/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION HSTA 1200 Ala Kapuna St Honolulu HI 96819	Teacher's Union	\$1,000.00	
10/29/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION ILWU LOCAL 142 451 ATKINSON DR Honolulu, HI 96814	OFFICERS + MEMBERS OF ILWU LOCAL 142	\$1,000.00	
11/12/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION UPW LOCAL 646 1426 N. School St Honolulu, HI 96817	United Public Workers Union	500.00	
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

\$2875.00

2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(iii)).....

\$2875.00

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME: CAROLYN MARTINEZ Golojuch PAGE 1 OF 3

Friends of Carolyn Golojuch

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
10/18/04	<input checked="" type="checkbox"/> NON-MONETARY CONTRIBUTION Home Depot via Mike Golojuch Kapolei, HI 96707	WOOD, screws + glue for signs	\$36.27
10/22/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION POSTMASTER Honolulu, HI 96801	Rolls of 23 + 37 stamps	\$245.00
10/22/04	<input checked="" type="checkbox"/> NON-MONETARY CONTRIBUTION De FINE Normal 238 SAND Island Avenue Rd Bldg R13 Honolulu, HI 96819	Campaign T-Shirts	245.83
10/23/04	<input checked="" type="checkbox"/> NON-MONETARY CONTRIBUTION Michael Golojuch 92954 MAKAKULU DR #71 Kapolei 96707	Computer supplies donated	10.84
10/23/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION MN Printing Waipahu, HI 96759	Walk cards	109.30
10/23/04	<input checked="" type="checkbox"/> NON-MONETARY CONTRIBUTION Carolyn Golojuch 92954 MAKAKULU DR #71 Kapolei 96707	GAS - campaign driving	18.00
10/23/04	<input checked="" type="checkbox"/> NON-MONETARY CONTRIBUTION Carolyn Golojuch 92954 MAKAKULU DR #71 Kapolei, HI 96707	CANVASSING SNACKS	9.22
1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....			674.46
2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....			

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 2 OF 3

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
10/25/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Fisher Printing Honolulu, HI	6000 mailouts still owe some funds.	1,000.00
10/25/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Longs Kapolei, HI	tape for mail out	5.16
10/26/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Costco Waipio-Century Waipahu, HI 96789	4900 stamps @ \$.37 ea	\$1,800.75
10/27/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Honolulu Advertiser Keolu ST Honolulu, HI 96817	Ad for Nov 1, 2004	309.03
10/28/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Honolulu Star-Bulletin Honolulu, HI	Ad for Nov 1, 2004	429.41
10/28/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Islands Marketing Inc Honolulu, HI	Bags for CANVASSING	16.08
10/28/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Fisher Hawaii Honolulu, HI	envelopes yellow	19.74

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....

3780.17

2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 3 OF 3

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
10/29/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Postmaster Honolulu, HI	1000 stamps @ \$.23 each	230.00
10/29/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION OFFICE MAX Waikale Waipahu, HI	Labels for POST CARDS	19.78
10/30/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION MN Printing Waipahu, HI	POST CARDS	120.85
10/30/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Postmaster Honolulu, HI	500 stamps @ \$.23 each	115.00
10/30/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION OFFICE MAX Waipahu, HI	Labels for POST CARDS	13.43
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page)..... 499.06

2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report)..... ~~499.06~~ 4953.69

ATTACH A COPY OF THE
EXECUTED LOAN DOCUMENT AT
THE TIME OF INITIAL DISCLOSURE

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE D
LOANS
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME: CAROLYN MARTINEZ Golojuch PAGE 1 OF 1

FRIENDS OF CAROLYN Golojuch

LOAN SOURCE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF LENDER	AMOUNT OF LOAN AT BEGINNING OF THIS PERIOD	NEW LOAN AMOUNT THIS PERIOD	AMOUNT REPAID OR FORGIVEN THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS PERIOD
DATE OF LOAN	PURPOSE OF LOAN				
<input type="checkbox"/> CANDIDATE <input checked="" type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER	MICHAEL Golojuch JR 92554 MAKAKULI DR #71 Kapolei 96707	\$ 316.07	Φ	<input type="checkbox"/> FORGIVEN \$ 316.07	Φ
<input type="checkbox"/> CANDIDATE <input checked="" type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER	Michele M. Golojuch 92554 MAKAKULI DR #71 Kapolei, HI 96707	21.35	Φ	<input type="checkbox"/> FORGIVEN Φ	21.35
<input checked="" type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER	CAROLYN Golojuch 92554 MAKAKULI DR #71 Kapolei, 96707	\$ 500.00 Φ	\$ 500.00	<input type="checkbox"/> FORGIVEN Φ	\$ 500.00
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	

1. SUBTOTAL (This Page)..... 500.00

2. TOTAL NEW LOANS THIS PERIOD (Last Page Only) (Transfer total to Line Number 14 of the Disclosure Report)..... \$ 500.00

3. TOTAL LOANS REPAID OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 17 of the Disclosure Report)..... 316.07

4. TOTAL LOANS AT THE CLOSING OF THIS PERIOD (Last Page Only) (Transfer total to Line Number 7 of the Disclosure Report)..... \$ 521.35

Form CC-5(D) (Rev. 5/99)

If a loan is forgiven, the loan must also be reported as a "Non-Monetary Contribution" on Schedule A. The forgiven loan does not have to be reported as an "Expenditure" on Schedule B.

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE E
UNPAID EXPENDITURES
CANDIDATE COMMITTEE**

NOTE: EXPENDITURES ARE CONSIDERED MADE WHEN THE PRODUCT IS DELIVERED OR THE SERVICE IS RENDERED (ACCRUAL METHOD OF ACCOUNTING).

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CANDIDATE AND CANDIDATE COMMITTEE NAME: CAROLYN MARTINEZ Golojich PAGE 1 OF 1
FRIENDS OF CAROLYN Golojich

DATE OF UNPAID EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR	AMOUNT OF UNPAID EXPENDITURE AT BEGINNING OF THIS PERIOD	NEW UNPAID EXPENDITURE AMOUNT THIS PERIOD	AMOUNT PAID OR FORGIVEN THIS PERIOD	AMOUNT OF UNPAID EXPENDITURE AT CLOSING OF THIS PERIOD
	PURPOSE OF UNPAID EXPENDITURE				
10/25/04	Fisher Printing Honolulu, HI FINAL AMOUNT DUE - JOB LARGER	\$ 623.95 ϕ	\$ 623.95 ϕ	<input type="checkbox"/> FORGIVEN ϕ	\$ 623.95
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	

1. SUBTOTAL (This Page).....	623.95		
2. TOTAL NEW UNPAID EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 20 of the Disclosure Report).....	\$ 623.95		
3. TOTAL UNPAID EXPENDITURES PAID OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 18 of the Disclosure Report).....	ϕ		
4. TOTAL UNPAID EXPENDITURES AT THE CLOSING OF THIS PERIOD (Last Page Only) (Transfer total to Line Number 8 of the Disclosure Report).....			\$ 623.95

Form CC-5(E) (Rev. 5/99)

If an unpaid expenditure is forgiven, the unpaid expenditure must also be reported as a "Non-Monetary Contribution" on Schedule A. The forgiven unpaid expenditure does not have to be reported as an "Expenditure" on Schedule B.